## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE		7	OF		29	
(check only one)												
	X	11a		11b		11c		12	2			
		13		14		15		16	6		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **CHERPAC** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pritzker, Jay, Robert, , Date of Receipt Mailing Address 111 S Wacker Dr 29 2020 Ste 4010 City State Zip Code Transaction ID: 7172729 IL 60606-4324 Chicago Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) State Of Illinois Governor Receipt For: Aggregate Year-to-Date ▼ Primary General \* Earmarked Contribution: See Below Other (specify) 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ActBlue Date of Receipt Mailing Address PO Box 382110 M M / D D / Y Y Y Y

			06	30	2020				
City Cambridge	State MA			Transaction ID : 7172729E  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C coo	401224		5000.00 <b>X</b> Memo Item					
Name of Employer (for Individual)		pation (for Individual) duit total listed in Agg. field	<b>X</b> Memo						
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 15500.00	Note: Above Contribution earmarked through this organization.						
Full Name of Individual (Last, First, Middle Pritzker, Mary, Kathryn, ,	Date of Re	eceipt							
Mailing Address 111 S Wacker Dr Ste 4010 City	State	Zip Code	06 Transact						
Chicago	IL	IL 60606-4324		Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С			5000.00					
Name of Employer (for Individual) None		pation (for Individual)	Memo	o Item					
Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 5000.00	* Earmarked	* Earmarked Contribution: See Below					
SUBTOTAL of Receipts This Page (optional)		10000.00							
TOTAL This Period (last page this line numb		4 4							
				FEC <b>Schedul</b> e	e A (Form 3X) Rev. 06/20				